# INDEPENDENT AUDITOR'S REPORT FINANCIAL STATEMENTS AND SUPPLEMENTARY INFORMATION

YEARS ENDED JUNE 30, 2010 AND 2009

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# GUTHRIE COUNTY HOSPITAL Officials June 30, 2010

Board of Trustees:	Address	Term <u>Expires</u>
Chris Schafer, Chairperson	Adair, Iowa	2010
Doug Hemphill, Vice-Chairperson	Panora, Iowa	2010
Peg Shroyer, Secretary	Panora, Iowa	2014
Jim Robson, Treasurer	Guthrie Center, Iowa	2012
Roberta Simmons	Panora, Iowa	2012
Rodney Carr	Guthrie Center, Iowa	2014
Mary Sheeder	Guthrie Center, Iowa	2010
Administrator: Gerald Neal	Guthrie Center, Iowa	
Chief Financial Officer:		
Melinda Alt	Audubon, Iowa	

# Gronewold, Bell, Kyhnn & Co. P.C. CERTIFIED PUBLIC ACCOUNTANTS: BUSINESS AND FINANCIAL CONSULTANTS

1910 EAST 7th STREET BOX 369 ATLANTIC, IOWA 50022-0369 (712) 243-1800 FAX (712) 243-1265 CPA@GBKCO.COM MARK D. KYHNN DAVID L. HANNASCH KENNETH P. TEGELS CHRISTOPHER J. NELSON DAVID A. GINTHER

#### INDEPENDENT AUDITOR'S REPORT

To the Board of Trustees Guthrie County Hospital Guthrie Center, Iowa

We have audited the accompanying balance sheets of Guthrie County Hospital as of June 30, 2010 and 2009, and the related statements of revenues, expenses and changes in net assets, and cash flows for the years then ended. These financial statements are the responsibility of the Hospital's management. Our responsibility is to express an opinion on these financial statements based on our audits.

We conducted our audits in accordance with auditing standards generally accepted in the United States of America and the standards applicable to financial audits contained in <u>Government Auditing Standards</u>, issued by the Comptroller General of the United States. Those standards require that we plan and perform the audit to obtain reasonable assurance about whether the financial statements are free of material misstatement. An audit includes examining, on a test basis, evidence supporting the amounts and disclosures in the financial statements. An audit also includes assessing the accounting principles used and significant estimates made by management, as well as evaluating the overall financial statement presentation. We believe that our audits provide a reasonable basis for our opinion.

As explained in Note A, the operations of a component unit are excluded from these financial statements. In our opinion, accounting principles generally accepted in the United States of America require that such an entity be blended with these financial statements.

In our opinion, except for the effects of exclusion of a component unit required to be included as discussed in the preceding paragraph, the financial statements referred to above present fairly, in all material respects, the financial position of Guthrie County Hospital as of June 30, 2010 and 2009, and the results of its operations, changes in net assets, and cash flows for the years then ended in conformity with accounting principles generally accepted in the United States of America.

In accordance with <u>Government Auditing Standards</u>, we have also issued our report dated September 17, 2010 on our consideration of Guthrie County Hospital's internal control over financial reporting and our tests of its compliance with certain provisions of laws, regulations, contracts, and grant agreements and other matters. The purpose of that report is to describe the scope of our testing of internal control over financial reporting and compliance and the results of that testing and not to provide an opinion on the internal control over financial reporting or on compliance. That report is an integral part of an audit performed in accordance with <u>Government Auditing Standards</u> and should be considered in assessing the results of our audit.

#### To the Board of Trustees Guthrie County Hospital

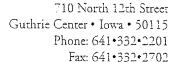
The management's discussion and analysis on pages 4 through 4g and the budgetary comparison schedule on page 21 are not a required part of the basic financial statements, but are supplementary information required by the Governmental Accounting Standards Board. We have applied certain limited procedures, which consisted principally of inquiries of management, regarding the methods of measurement and presentation of the required supplementary information. However, we did not audit the information and express no opinion on it.

Our audits were made for the purpose of forming an opinion on the basic financial statements taken as a whole. We previously audited, in accordance with the standards referred to in the second paragraph of this report, the financial statements for the three years ended June 30, 2008 (none of which are presented herein) and expressed qualified opinions on those financial statements. The supplementary information (shown on pages 22 through 37) is presented for purposes of additional analysis and is not a required part of the basic financial statements. Such information has been subjected to the auditing procedures applied in our audits of the basic financial statements and, in our opinion, is fairly stated in all material respects in relation to the basic financial statements taken as a whole.

Gronewold, Bell, Kylm . W. P.C.

Atlantic, Iowa

September 17, 2010





Our discussion and analysis of Guthrie County Hospital's financial performance provides an overview of the Hospital's financial activity for the fiscal years ended June 30, 2010 and 2009. We encourage readers to consider it in conjunction with the Hospital's financial statements, which follow.

#### FINANCIAL HIGHLIGHTS

The Hospital's total assets increased approximately \$1,560,000 during fiscal year 2010. Net assets, or total assets net of total liabilities, increased by approximately \$872,000 during fiscal 2010, an increase of approximately 10.9 percent.

The Hospital reported operating revenues for the year of \$10.6 million, an increase of approximately \$1,163,000 or 12.4 percent. Net revenues, or revenues after all expenditures, for 2010 were \$712,904, an increase of \$342,015 from 2009.

The Hospital reported expenditures for the year of \$11.1 million, an increase of approximately \$810,000 or 7.9 percent.

#### USING THIS ANNUAL REPORT

The basic financial statements of the Hospital report information about the Hospital using Governmental Accounting Standards Board (GASB) accounting principles. The Hospital's financial statements consist of three statements - a Balance Sheet; a Statement of Revenues, Expenses and Changes in Net Assets; and a Statement of Cash Flows. These statements offer short-term and long-term financial information about its activities.

One of the most important questions asked about the Hospital's finances is, "Is the Hospital as a whole better or worse off as a result of the year's activities?" The Balance Sheet and the Statement of Revenues, Expenses and Changes in Net Assets; and the Statement of Cash Flows report information about the Hospital's resources and its activities in a way that helps answer this question. These statements include all restricted and unrestricted assets and all liabilities using the accrual basis of accounting. Therefore, all of the current year's revenues and expenses are taken into account regardless of when the cash is received or paid.

The first two statements report the Hospital's net assets and changes in them. You can think of the Hospital's net assets - the difference between assets and liabilities - as one way to measure the Hospital's financial health, or financial position. Over time, increases or decreases in the Hospital's net assets are one indicator of whether its financial health is improving or deteriorating. You will need to consider other non-financial factors, however, to assess the overall health of the Hospital. Such non-financial factors could include changes in the Hospital's patient base, measures of the quality of service it provides to the community, and local economic factors, as well as changes in the health care industry, changes in Medicare and Medicaid regulations, and changes in managed care contracting.

The Balance Sheets include all of the Hospital's assets and liabilities and provide information about the nature and amounts of investments in resources (assets) and the obligations to Hospital creditors (liabilities). It also provides the basis for computing rate of return, evaluating the capital structure of the Hospital, and assessing the liquidity and financial flexibility of the Hospital.

All of the current year's revenues and expenses are accounted for in the Statements of Revenues, Expenses, and Changes in Net Assets. This statement measures improvements in the Hospital's operations over the past years and can be used to determine whether the Hospital has been able to recover all of its costs through its patient service revenue and other revenue sources.

The final required financial statement is the Statement of Cash Flows. This statement reports cash receipts, cash payments, and net changes in cash resulting from operations, investing, and financing activities. The primary purpose of this statement is to provide information about the Hospital's cash from operations, investing, and financing activities, and to provide answers to such questions as "Where did cash come from?", "What was cash used for?", and "What was the change in cash balance during the reporting period?"

These financial statements and related notes also provide information about the activities of the Hospital, including resources held by the Hospital but restricted for specific purposes by contributors, grantors, or enabling legislation.

#### THE HOSPITAL'S NET ASSETS

The Hospital's net assets are the difference between its assets and liabilities reported in the Balance Sheet on page 5. The following table, Table 1, presents a summary of the Hospital's Balance Sheets.

Table 1 Condensed Balance Sheets

	***************************************	2010		2009		2008
Assets: Current assets	\$	3,834,335	\$	4,541,475	\$	4,247,961
Designated and restricted assets Capital assets, net Other noncurrent assets		10,326,982 127,168		8,135,860 54,943		810,990 6,207,903 35,204
Total assets	<u>\$</u>	14,288,485	<u>\$</u>	12,732,278	<u>\$</u>	11,302,058
Liabilities: Current liabilities Long-term debt Total liabilities	\$	3,044,653 2,407,500 5,452,153	\$	2,950,190 1,817,500 4,767,690	\$	2,156,206 1,880,000 4,036,206
Net Assets: Invested in capital assets, net of related debt Restricted - expendable Unrestricted		7,003,926 242,210 1,590,196		5,779,942 80,556 2,104,090		4,021,067 80,110 3,164,675
Total net assets		8,836,332		7,964,588		7,265,852
Total liabilities and net assets	<u>\$</u>	14,288,485	<u>\$</u>	12,732,278	<u>\$</u>	11,302,058

A significant component of the change in the Hospital's assets is the investment in the new building and equipment. See related discussion in the CAPITAL ASSETS AND DEBT ADMINISTRATION section.

The most significant component of the change in the Hospital's liabilities was the increased borrowing from the 2009 Bond Issue. See related discussion in the CAPITAL ASSETS AND DEBT ADMINISTRATION section.

## OPERATING RESULTS AND CHANGES IN THE HOSPITAL'S NET ASSETS

The following table, Table 2, presents a summary of the Hospital's historical revenues and expenses for each of the fiscal years ended June 30, 2010, 2009, and 2008.

Table 2 Condensed Operating Results and Changes in Net Assets

	2010	2009	2008
Revenue: Net patient service revenue Other revenue Total revenue	\$ 10,355,628	\$ 9,189,319	\$ 8,718,451
Expenses: Salaries and benefits Professional fees Supplies, contract services, equipment & other	7,396,404 385,456	6,593,106 642,935	5,834,849 554,016
operating expenses Depreciation and amortization Total expenses	2,512,356 790,331 11,084,547	2,312,582 725,890 10,274,513	2,230,229 661,177 9,280,271
Operating Loss	( 533,968)	( 887,092)	( 368,440)
Nonoperating Revenues and Expenses: County taxes Investment income Noncapital grants and contributions Interest expense Other nonoperating revenues and expenses, net	1,282,244 13,911 30,317 ( 79,600)  1,246,872	1,283,702 38,054 40,479 ( 98,982) ( 5,272) 1,257,981	1,194,367 52,034 21,927 ( 62,011) ( 510) 1,205,807
Excess of Revenues Over Expenses Before Capital Grants and Contributions	712,904	370,889	837,367
Capital Grants and Contributions	158,840	327,847	250,000
Increase in net assets	871,744	698,736	1,087,367
Net Assets Beginning of Year	7,964,588	7,265,852	6,178,485
Net Assets End of Year	\$ 8,836,332	<u>\$ 7,964,588</u>	<u>\$ 7,265,852</u>

#### **OPERATING LOSSES**

The first component of the overall change in the Hospital's net assets is its operating loss - generally, the difference between net patient service revenues and the expenses incurred to perform those services. In each of the past three years, the Hospital has reported an operating loss. This is consistent with the Hospital's entire operating history. The Hospital's operations were begun in 1951 as a county hospital, when it was agreed that a portion of its costs would be subsidized by property tax revenues, making the facility more affordable for the County's lower income residents. In the current fiscal year operating losses have decreased.

Management's goal in 2010 was to continue the effort to increase the volume of patients treated while positioning the hospital and clinics to capture a greater portion of the Guthrie County health care market. Efforts continued to make the community more aware of the services provided at the Hospital.

In 2010 significant time and money investments were made to continue the process of positioning the Hospital to be more competitive in the primary and secondary health care market. The new practitioners have enabled the Hospital to offer new services. We have resolved a number of operating issues with the hospital and clinic buildings and have continued upgrading the Hospital's physical plant.

During calendar year 2007, we completed the additions in Pharmacy, Radiology and the Emergency Department. Each of these additions has had a positive response from the community.

The Operating Room addition and Rehab and Education additions were both completed in February, 2009. These additions have had a positive response from the community.

In May 2010, we completed construction of the 4 new Patient Room addition. This addition along with the new Medical Office building that was completed in July 2010 will allow us to expand our services into orthopedics.

The primary components of these decreased operating losses were:

An increase in net revenue of \$1,163,000 or 12.4%.

Increases in salary and benefit costs for the Hospital's employees (\$803,300 or 12.2% in 2010 and \$758,300 or 13.0% in 2009). This increase is due to the continued adjustments made in salaries to match market conditions and to increases in health insurance costs.

#### NON-OPERATING REVENUES AND EXPENSES

Non-operating revenues consist primarily of property taxes levied by the Hospital and interest income reported as investment earnings.

The Hospital's Non-operating Revenues and Expenses decreased by \$11,109 comparing fiscal 2010 versus 2009. Interest expense decreased by \$19,382 as a result of payments made to the 2006 Bond issue.

## THE HOSPITAL'S CASH FLOW

Changes in the Hospital's cash flows are consistent with changes in operating losses and non-operating revenues and expenses, as discussed earlier. Cash flows used in operating activities for 2010 were \$506,695. Comparatively, for fiscal 2009, cash flows provided by operating activities were \$803,216, a net change of \$1,309,911. This change was due to significantly decreased cash receipts, and increasing expenses. The increases in expenses were primarily in a couple areas. First, staffing of the Emergency Department, Panora and Adair Clinics was changed to better serve the community. Finally, investments were continued to be made in the Hospital's physical plant.

#### **BUDGETARY HIGHLIGHTS**

The official county budget of the Hospital for the year ended June 30, 2010 was prepared on the modified accrual basis. Actual budget basis revenues were higher than the budgeted amount of \$11,970,395 by \$65,496 or about 0.5 percent. Actual expenditures were lower than budgeted expenditures. Actual budget basis expenditures were \$11,164,147 as compared to budgeted expenditures of \$11,600,000, a difference of \$435,853 or about 3.8 percent.

#### CAPITAL ASSETS AND DEBT ADMINISTRATION

#### **Capital Assets:**

During the fiscal year, the Hospital made capital investments totaling \$2,981,453. The following table, Table 3, presents a list of significant capital items:

## Table 3 Capital Investments

Capital Investments	<u>Vendor</u>	<u>Department</u>	2	010 Cost
4 Patient Room Addition	Miscellaneous	Nursing	\$	1,474,600
13 <sup>th</sup> Street	Cedar Valley Corporation	Land Improvement		587,580
Electronic Health Record	Medhost	Emergency Room		173,869
C-Arm Machine	Philips Medical Systems	Radiology		111,255

Capital assets for the years ended June 30, 2010, 2009, and 2008 are shown in the following table, Table 4:

# Table 4 Capital Assets

		2010		2009	 2008
Land and land improvements Buildings Fixed equipment Major movable equipment Subtotal Less accumulated depreciation Construction in progress	\$	1,110,421 9,652,220 1,722,312 3,697,583 16,182,536 6,693,946 838,392	\$	458,551 8,157,269 1,560,083 3,303,897 13,479,800 5,907,814 563,874	\$  357,452 6,443,304 1,546,442 2,829,736 11,176,934 5,223,417 254,386
Net capital assets	<u>\$</u>	10,326,982	<u>\$</u>	8,135,860	\$ 6,207,903

Net capital assets increased as the Hospital has upgraded existing facilities and equipment. The Hospital is also in the process of building new space to accommodate increasing outpatient services. See discussion in the section titled CURRENTLY KNOWN FACTS.

#### Debt:

At year-end, the Hospital had \$2,917,500 in short-term and long-term debt. The total debt amount increased by \$910,000 in fiscal year 2010. More detailed information about the Hospital's long-term liabilities is presented in the notes to the basic financial statements.

Total debt outstanding represents approximately 20.4% of the Hospital's total assets at June 30, 2010.

#### **CURRENTLY KNOWN FACTS**

At the time these financial statements were prepared and audited, the Hospital had just completed its Medical Office Building addition at an approximately cost of \$870,000. The project is mainly being funded by a 2009 Bond issue.

#### CONTACTING THE HOSPITAL'S FINANCIAL MANAGEMENT

This financial report is designed to provide our citizens, customers and creditors with a general overview of the Hospital's finances and to demonstrate the Hospital's accountability for the money it receives. If you have questions about this report or need additional financial information, contact Hospital Administration.

# GUTHRIE COUNTY HOSPITAL Balance Sheets June 30,

# <u>ASSETS</u>

		2010		2009
Current Assets: Cash Patient receivables, less allowances for doubtful accounts and for contractual	\$	398,618	\$	1,426,524
adjustments (\$421,100 in 2010, \$386,500 in 2009) Other receivables Inventory Prepaid expense Other current assets		1,242,396 23,957 206,368 115,649 19,465		1,167,168 18,842 197,114 96,163 27,490
Estimated third-party payor settlements Succeeding year property tax receivable Internally designated assets Total current assets		213,000 1,372,000 242,882 3,834,335		1,250,400 357,774 4,541,475
Designated and Restricted Assets: Internally designated assets Restricted assets Less amounts required to meet current liabilities	_	672 242,210 242,882 242,882		277,218 <u>80,556</u> 357,774 357,774
Capital Assets: Depreciable capital assets, net	and the second s	9,390,910		7,511,960
Non-depreciable capital assets  Deferred Financing Costs	**************************************	936,072 10,326,982 77,168		623,900 8,135,860 32,443
Notes Receivable		50,000		22,500
Total assets	<u>\$</u>	14,288,485	\$	12,732,278

The accompanying notes are an integral part of these statements.

# <u>LIABILITIES AND NET ASSETS</u>

	 2010		2009
Current Liabilities: Current maturities of long-term debt Accounts payable Accrued employee compensation Payroll taxes withheld and accrued Estimated third-party payor settlements Deferred revenue for succeeding year property tax receivable Total current liabilities	\$ 510,000 635,694 497,069 29,890  1,372,000 3,044,653	\$	190,000 578,356 459,005 28,429 444,000 1,250,400 2,950,190
Long-Term Debt: Note payable, less current maturities Revenue bonds, less current maturities Total long-term debt  Total liabilities	 67,500 2,340,000 2,407,500 5,452,153		97,500 1,720,000 1,817,500 4,767,690
Net Assets: Invested in capital assets, net of related debt Restricted - expendable Unrestricted Total net assets	 7,003,926 242,210 1,590,196 8,836,332	***************************************	5,779,942 80,556 2,104,090 7,964,588
Total liabilities and net assets	\$ 14,288,485	\$	12,732,278

# GUTHRIE COUNTY HOSPITAL Statements of Revenues, Expenses and Changes in Net Assets Year ended June 30,

	2010			2009	
Revenue:					
Net patient service revenue	\$	10,355,628	\$	9,189,319	
Other revenue		194,951		198,102	
Total revenue		10,550,579		9,387,421	
Expenses:  Nursing service Other professional service Physician clinic service General service Fiscal and administrative service Provision for depreciation Total expenses		2,219,306 4,046,249 771,093 1,245,219 2,012,349 790,331 11,084,547		1,959,299 3,720,571 764,943 1,156,084 1,947,726 725,890 10,274,513	
Operating Loss	(	533,968)	(	887,092)	
Non-Operating Revenues (Expenses): County taxes Investment income Noncapital grants and contributions Loss on disposal of property and equipment Interest expense Non-operating revenues, net	(	1,282,244 13,911 30,317  79,600) 1,246,872	(	1,283,702 38,054 40,479 5,272) 98,982) 1,257,981	
Excess of Revenues Over Expenses Before Capital Grants and Contributions		712,904		370,889	
Capital Grants and Contributions		158,840		327,847	
Increase in Net Assets		871,744		698,736	
Net Assets Beginning of Year		7,964,588		7,265,852	
Net Assets End of Year	<u>\$</u>	8,836,332	<u>\$</u>	7,964,588	

The accompanying notes are an integral part of these statements.

# GUTHRIE COUNTY HOSPITAL Statements of Cash Flows Year ended June 30,

	2010	2009
Cash flows from operating activities:  Cash received from patients and third-party payors Cash paid to suppliers Cash paid to employees Other revenue Net cash provided by (used in) operating activities	\$ 9,618,285 ( 4,812,179) ( 5,507,752) <u>194,951</u> ( 506,695)	\$ 10,070,547 ( 4,527,856) ( 4,937,577) <u>198,102</u> 803,216
	( 300,073)	003,210
Cash flows from non-capital financing activities: County tax revenue Noncapital grants and contributions Net cash provided by non-capital financing activities	1,282,244 30,317 1,312,561	1,283,702 40,479 1,324,181
Cash flows from capital and related financing activities: Capital grants and contributions Capital expenditures Construction in progress expenditures Principal paid on long-term debt Proceeds from revenue bonds Proceeds from note payable Proceeds from sale of property and equipment Interest paid Deferred financing costs paid Net cash used in capital and related financing activities	158,840 ( 277,534) ( 2,592,664) ( 190,000) 1,100,000  ( 86,231) ( 47,486) ( 1,935,075)	327,847 ( 456,173) ( 1,970,900) ( 217,272)  150,000 1,547 ( 96,339)  ( 2,261,290)
Cash flows from investing activities: Investment income Change in notes receivable Change in designated and restricted assets Net cash provided by (used in) investing activities	13,911 ( 27,500) ( 107,070) ( 120,659)	38,054 ( 22,500) 304,098 319,652
Net increase (decrease) in cash and cash equivalents	( 1,249,868)	185,759
Cash and cash equivalents at beginning of year	1,650,586	1,464,827
Cash and cash equivalents at end of year	\$ 400,718	<u>\$ 1,650,586</u>
Reconciliation of cash and cash equivalents to the balance sheets:  Cash and cash equivalents in current assets Cash and cash equivalents in designated and restricted assets	\$ 398,618 2,100	\$ 1,426,524 224,062
Total cash and cash equivalents	<u>\$ 400,718</u>	<u>\$ 1,650,586</u>

(continued next page)

## GUTHRIE COUNTY HOSPITAL Statements of Cash Flows - Continued Year ended June 30,

		2010		2009
Reconciliation of operating loss to net cash provided by (used in) operating activities:				
Operating loss	\$(	533,968)	\$(	887,092)
Adjustments to reconcile operating loss to	•		`	,
net cash provided by (used in) operating activities				
Depreciation		790,331		725,890
Change in assets and liabilities				
Accounts receivable	(	80,343)		257,228
Inventory	(	9,254)		4,498
Prepaid expense	(	19,486)	(	28,425)
Other current assets	,	8,025	Ì	4,964)
Accounts payable, trade	(	44,525)	`	58,121
Accrued employee compensation		38,064		42,085
Payroll taxes withheld and accrued		1,461		11,875
Estimated third-party payor settlements	(	657,000)		624,000
Total adjustments		27,273		1,690,308
Net cash provided by (used in) operating activities	\$(	506,695)	\$	803,216

Notes to Financial Statements June 30, 2010 and 2009

# NOTE A - REPORTING ENTITY AND SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

#### 1. Reporting Entity

Guthrie County Hospital (the Hospital) is a critical access county hospital with related healthcare ancillary and outpatient services. The Hospital is organized under Chapter 347 of the Code of Iowa, accordingly is a political subdivision of the State of Iowa, and is therefore exempt from federal and state income taxes. It is governed by a seven member board of trustees elected for six year terms. The Hospital has considered all potential component units for which it is financially accountable, and other organizations for which the nature and significance of their relationship with the Hospital are such that exclusion would cause the Hospital's financial statements to be misleading or incomplete. The criteria for determining financial accountability include: appointing a majority of an organization's governing body, and (a) the Hospital's ability to impose its will on that organization, or (b) the potential for the organization to provide benefits to or impose financial burdens on the Hospital. The Hospital has identified one component unit: Guthrie County Hospital Foundation (the Foundation). Substantially all of the economic resources of the Foundation are designated for the direct benefit of the Hospital. The Hospital received \$157,315 in capital contributions from the Foundation during the year ended June 30, 2010 (\$327,381 in 2009). Blending of the Foundation with the Hospital would result in an increase in total net assets of approximately \$139,000 (\$202,000 in 2009) and a decrease in the change in net assets of approximately \$63,000 (\$81,000 decrease in 2009) for the year ended June 30, 2010.

#### 2. Enterprise Fund Accounting

The Hospital uses enterprise fund accounting. Revenues and expenses are recognized on the accrual basis using the economic resources measurement focus. Based on Governmental Accounting Standards Board (GASB) Statement No. 20, Accounting and Financial Reporting for Proprietary Funds and Other Governmental Entities That Use Proprietary Fund Accounting, as amended, the Hospital has elected to apply the provisions of all relevant pronouncements of the Financial Accounting Standards Board (FASB), that do not conflict with or contradict GASB pronouncements.

#### 3. Use of Estimates

The preparation of financial statements in conformity with accounting principles generally accepted in the United States of America requires management to make estimates and assumptions that affect the reported amounts of assets and liabilities and disclosure of contingent assets and liabilities at the date of the financial statements and the reported amounts of revenues and expenses during the reporting period. Actual results could differ from those estimates.

#### 4. Cash and Cash Equivalents

Cash and cash equivalents include investments in highly liquid debt instruments with an original maturity of three months or less, including designated and restricted assets.

Notes to Financial Statements June 30, 2010 and 2009

# NOTE A - REPORTING ENTITY AND SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES - Continued

#### 5. Inventory Valuation

Inventory is valued at the lower of cost (first-in, first-out method) or market.

#### 6. Investments

Investments are reported at fair value except for short-term highly liquid investments that have a remaining maturity at the time they are purchased of one year or less. These investments are carried at amortized cost. Interest, dividends, and gains and losses, both realized and unrealized, on investments are included in non-operating revenue when earned, unless restricted by donor or law.

#### 7. Capital Assets

The Hospital's capital assets are reported at historical cost. Contributed capital assets are reported at their estimated fair value at the time of their donation. Capital assets with lives in excess of two years and cost in excess of \$5,000 are capitalized. These capital assets, other than land, are depreciated or amortized (in the case of capital leases) using the straight-line method of depreciation using their estimated useful lives (fifteen to forty years for buildings and land improvements and three to twenty years for equipment).

#### 8. Costs of Borrowing

Except for capital assets acquired through gifts, contributions, or capital grants, interest cost on borrowed funds during the period of construction of capital assets is capitalized as a component of the cost of acquiring those assets. The Hospital capitalized \$9,392 of interest cost in 2010 and none in 2009.

#### 9. Compensated Absences

Hospital employees earn vacation days at varying rates depending on years of service. Vacation time accumulates to a maximum of 150% of an employee's annual vacation time earned (maximum of 300 hours). Any excess accumulated over the maximum is to be used within 90 days. Certain employees have been allowed to accrue more than the maximum allowed vacation because these employees are unable to use their vacation due to their departments being understaffed. The computed amount of vacation benefits earned by year end is recorded as part of accrued employee compensation.

#### 10. Operating Revenues and Expenses

The Hospital's statement of revenues, expenses and changes in net assets distinguishes between operating and non-operating revenues and expenses. Operating revenues result from exchange transactions associated with providing health care services - the Hospital's principal activity. Nonexchange revenues, including taxes, grants, and contributions received for purposes other than capital asset acquisition, are reported as non-operating revenues. Operating expenses are all expenses incurred to provide health care services, other than financing costs.

Notes to Financial Statements June 30, 2010 and 2009

# NOTE A - REPORTING ENTITY AND SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES - Continued

#### 11. Net Patient Service Revenue

The Hospital has agreements with third-party payors that provide for payments to the Hospital at amounts different from its established rates. Payment arrangements include prospectively determined rates per discharge, reimbursed costs, discounted charges, and per diem payments. Net patient service revenue is reported at the estimated net realizable amounts from patients, third-party payors, and others for services rendered, including estimated retroactive adjustments under reimbursement agreements with third-party payors. Retroactive adjustments are accrued on an estimated basis in the period the related services are rendered and adjusted in future periods as final settlements are determined.

#### 12. Property Tax Levy

Property tax receivable is recognized on the levy or lien date, which is the date that the tax asking is certified by the County Board of Supervisors. The succeeding year property tax receivable represents taxes certified by the Board of Supervisors to be collected in the next fiscal year for the purposes set out in the budget for that year. Although the succeeding year property tax receivable has been recorded, the related revenue is deferred and will not be recognized as revenue until the year for which it is levied. Property tax revenue is reported as non-operating revenue when collected by the County Treasurer.

#### 13. Grants and Contributions

Revenues from grants and contributions (including contributions of capital assets) are recognized when all eligibility requirements, including time requirements are met. Grants and contributions may be restricted for either specific operating purposes or for capital purposes. Amounts that are unrestricted or that are restricted to a specific operating purpose are reported as non-operating revenues. Amounts restricted to capital acquisitions are reported after non-operating revenues and expenses.

#### 14. Restricted Resources

Use of restricted or unrestricted resources for individual projects is determined by the Hospital Board of Trustees based on the facts regarding each specific situation.

#### 15. Net Assets

Net assets of the Hospital are classified in three components. Net assets invested in capital assets net of related debt consist of capital assets net of accumulated depreciation and reduced by the current balances of any outstanding borrowings used to finance the purchase or construction of those assets. Restricted net assets are noncapital net assets that must be used for a particular purpose or permanent endowments, as specified by creditors, grantors, or contributors external to the Hospital. Unrestricted net assets are remaining net assets that do not meet the definition of invested in capital assets net of related debt or restricted.

Notes to Financial Statements June 30, 2010 and 2009

# NOTE A - REPORTING ENTITY AND SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES - Continued

#### 16. Charity Care

The Hospital provides care to patients who meet certain criteria under its charity care policy without charge or at amounts less than its established rates. Revenue from services to these patients is automatically recorded in the accounting system at the established rates, but the Hospital does not pursue collection of the amounts. The resulting adjustments are recorded as bad debts or charity service depending on the timing of the charity determination.

#### NOTE B - THIRD-PARTY PAYOR ARRANGEMENTS

A summary of the payment arrangements with major third-party payors follows:

Medicare and Medicaid - Inpatient services and most outpatient services related to program beneficiaries are paid based on a cost reimbursement methodology. The Hospital is reimbursed for the cost of services at a tentative rate with final settlement determined after submission of annual cost reports by the Hospital and audits thereof by the fiscal intermediaries. The Hospital's Medicare cost reports have been audited and finalized by the fiscal intermediary through June 30, 2008. The Hospital's Medicaid cost reports have been finalized by the fiscal intermediary through June 30, 2008. However, finalized cost reports are subject to re-opening by the intermediaries within three years after the date of finalization. Outpatient services not paid based on a cost reimbursement methodology are paid based on a prospectively determined fee schedule.

The Hospital also has entered into payment agreements with certain commercial insurance carriers, health maintenance organizations, and preferred provider organizations. The basis for payment to the Hospital under these agreements includes prospectively determined rates per discharge, discounts from established charges, and prospectively determined daily rates.

#### NOTE C - RESTRICTED NET ASSETS

Restricted expendable net assets are available for the following purposes:

		2010		2009
Long-term debt Purchase of property and equipment	\$	240,219 1,991	\$	80,090 466
	<u>\$                                    </u>	242,210	<u>\$</u>	80,556

The Hospital has no restricted non-expendable net assets or endowments at June 30, 2010 or 2009.

Notes to Financial Statements June 30, 2010 and 2009

#### NOTE C - RESTRICTED NET ASSETS - Continued

Following is a summary of the use of temporarily restricted net assets during the year ended June 30:

		2010	 2009
Payment of long-term debt Purchase of property and equipment	\$	157,31 <u>5</u>	\$  20 327,381
	<u>\$</u>	157,315	\$ 327,401

#### NOTE D - DESIGNATED NET ASSETS

Of the \$1,590,196 (\$2,104,090 as of June 30, 2009) of unrestricted net assets as of June 30, 2010, \$672 (\$277,218 for 2009) has been designated by the Hospital's Board of Trustees for capital acquisitions. These assets remain under the control of the Board of Trustees, which may, at its discretion, later use the funds for other purposes.

#### NOTE E - DEPOSITS AND INVESTMENTS

The Hospital's deposits at June 30, 2010 were entirely covered by federal depository insurance or the State Sinking Fund in accordance with Chapter 12C of the Code of Iowa. This chapter provides for additional assessments against the depositories to ensure there will be no loss of public funds. Investments are stated as indicated in Note A.

The Hospital is authorized by statute to invest public funds in obligations of the United States Government, its agencies and instrumentalities; certificates of deposit or other evidences of deposit at federally insured depository institutions approved by the Board of Trustees; prime eligible bankers acceptances; certain high rated commercial paper; perfected repurchase agreements; certain registered open-end management investment companies; certain joint investment trusts; and warrants or improvement certificates of a drainage district.

The composition of designated and restricted assets is as follows:

	2010		2009		
Internally Designated Assets:  Cash and cash equivalents  Certificates of deposit  GNMA pool  Interest receivable	\$	109  563 	\$	223,596 52,879 634 109	
	<u>\$</u>	672	<u>\$</u>	277,218	
Restricted Assets: Certificates of deposit Cash and cash equivalents	\$	240,219 1,991	\$	80,090 466	
	<u>\$</u>	242,210	<u>\$</u>	80,556	

Notes to Financial Statements June 30, 2010 and 2009

#### NOTE E - DEPOSITS AND INVESTMENTS - Continued

The Hospital's investment policy limits the investment of operating funds (funds expected to be expended in the current budget year or within 15 months of receipt) in instruments that mature within 397 days. Funds not identified as operating funds may be invested in investments with maturities longer than 397 days but the maturities shall be consistent with the needs and use of the Hospital.

#### NOTE F - ACCOUNTS RECEIVABLE AND CONCENTRATION OF CREDIT RISK

The Hospital grants credit without collateral to its patients, most of whom are local residents and are insured under third-party payor agreements. The mix of receivables from patients and third-party payors at June 30, 2010 and 2009, was as follows:

		2010	 2009
Receivable from:			
Patients	\$	363,361	\$ 307,033
Medicare		724,777	555,036
Medicaid		36,318	42,931
Blue Cross		190,262	281,690
Other commercial insurance carriers		348,778	 366,978
		1,663,496	1,553,668
Less allowances for doubtful accounts and			
contractual adjustments		421,100	 386,500
	<u>\$</u>	1,242,396	\$ 1,167,168

# NOTE G - CAPITAL ASSETS

Capital assets, additions, disposals and balances for the years ended June 30, 2010 and 2009 were as follows:

Cost	Balance 2009	Additions	Disposals	Balance 2010
Land Improvements Buildings Fixed Equipment Major Movable Equipment  Depreciation	\$ 398,525 8,157,269 1,560,083 3,303,897 13,419,774	\$ 614,216 1,494,951 166,428 393,686 2,669,281	\$ 4,199  4,199	\$ 1,012,741 9,652,220 1,722,312 3,697,583 16,084,856
Land Improvements Buildings Fixed Equipment Major Movable Equipment	224,486 2,797,064 817,006 2,069,258	61,959 319,009 118,789 290,574	  4,199 	286,445 3,116,073 931,596 2,359,832
Total Depreciation	5,907,814	790,331	4,199	6,693,946
Total Depreciable Capital Assets, Net	<u>\$ 7,511,960</u>	<u>\$1,878,950</u>	\$	\$ 9,390,910
Construction in Progress Land	\$ 563,874 60,026	\$2,476,860 <u>37,654</u>	\$2,202,342	\$ 838,392 97,680
Total Non-Depreciable Capital Assets	\$ 623,900	<u>\$2,514,514</u>	<u>\$2,202,342</u>	\$ 936,072

NOTE G - CAPITAL ASSETS - Continued

Cost	Balance 2008	Additions	Disposals	Balance 2009
Land Improvements Buildings Fixed Equipment Major Movable Equipment  Depreciation	\$ 336,069 6,443,304 1,546,442 2,829,736 11,155,551	\$ 62,456 1,713,965 13,641 522,473 2,312,535	\$  48,312 48,312	\$ 398,525 8,157,269 1,560,083 3,303,897 13,419,774
Land Improvements Buildings Fixed Equipment Major Movable Equipment	202,485 2,513,893 701,437 1,805,602	22,001 283,171 115,569 305,149	  41,493	224,486 2,797,064 817,006 2,069,258
Total Depreciation	5,223,417	725,890	41,493	5,907,814
Total Depreciable Capital Assets, Net	\$ 5,932,134	<u>\$1,586,645</u>	\$ 6,819	\$ 7,511,960
Construction in Progress Land	\$ 254,386 21,383	\$2,202,618 <u>38,643</u>	\$1,893,130	\$ 563,874 60,026
Total Non-Depreciable Capital Assets	\$ 275,769	<u>\$2,241,261</u>	<u>\$1,893,130</u>	\$ 623,900

## NOTE H - NON-CURRENT LIABILITIES

A schedule of changes in the Hospital's non-current liabilities for the years ended June 30, 2010 and 2009 follows:

	Balance 2009	Additions	Reductions	Balance 2010	Current Portion
Long-Term Debt: Rural Economic Development Loan	\$ 127,500	\$	\$ 30,000	\$ 97,500	\$ 30,000
Series 2006 Revenue Bonds	1,880,000		160,000	1,720,000	160,000
Series 2009 Revenue Bonds	and the	1,100,000	1/A was	_1,100,000	320,000
Total Non-Current Liabilities	\$2,007,500	\$1,100,000	<u>\$ 190,000</u>	\$2,917,500	\$ 510,000

#### NOTE H - NON-CURRENT LIABILITIES - Continued

	Balance 2008	<u>A</u>	dditions	Re	eductions		Balance 2009		Current Portion
Long-Term Debt: Rural Economic Development Loan	\$	\$	150,000	\$	22,500	\$	127,500	\$	30,000
Series 2006 Revenue Bonds	2,040,000				160,000	1	,880,000		160,000
Capital Lease Obligations	34,772			_	34,772			_	
Total Non-Current Liabilities	\$2,074,772	<u>\$</u>	150,000	<u>\$_</u>	217,272	<u>\$2</u>	2,007,500	<u>\$</u>	190,000

In September, 2008, the Hospital borrowed \$150,000 through the Guthrie County Rural Electric Cooperative under the Rural Economic Development Loan and Grant Program. The loan is non-interest bearing and is payable in twenty equal quarterly installments commencing November 15, 2008. The loan is collateralized by the Hospital's net revenues.

The Series 2006 Hospital Revenue Bonds were issued in May, 2006 in a principal amount up to \$2,200,000. The bonds carry an interest rate of 4.00% per annum through September 30, 2012. On September 30, 2012 and again on September 30, 2015 and 2018, the rate will be adjusted to 0.50% over the "constant maturity" index of the three year U.S. Treasury Note rate in effect on those dates, provided however, that no adjusted interest rate shall be 2% higher or lower than the immediately preceding adjusted interest rate and no adjusted interest rate shall exceed 8% per annum or be less than 4% per annum. The bonds mature in quarterly installments of principal in the amount of \$40,000 plus interest. The bonds are payable from and secured by a lien on net revenues of the Hospital.

The Series 2009 Hospital Revenue Bonds were issued in September, 2009 in a principal amount up to \$3,200,000. Under the bond agreement, the Hospital has the option to draw up to the full \$3,200,000 as their phased construction project (described in Note J) develops. Through June 30, 2010, the Hospital had drawn \$1,100,000 on these bonds to pay for issuance costs of the bonds and construction costs incurred through June 30, 2010. The bonds carry an interest rate of 4.00% per annum through September 30, 2012. On September 30, 2012 and again on September 30, 2015 and 2018, the rate will be adjusted to 0.50% over the "constant maturity" index of the three year U.S. Treasury Note rate in effect on those dates, provided however, that no adjusted interest rate shall be 2% higher or lower than the immediately preceding adjusted interest rate and no adjusted interest rate shall exceed 8% per annum or be less than 4% per annum. Commencing September 30, 2010, the bonds mature in quarterly installments of principal in the amount of \$80,000 plus interest. The bonds are payable from and secured by a lien on net revenues of the Hospital.

The combined annual debt service on the loan and bonds is expected to require less than 40% of cash flow available for debt service. For the current year, debt service and cash flow available for debt service were approximately \$279,000 and \$1,742,000, respectively.

## GUTHRIE COUNTY HOSPITAL Notes to Financial Statements

June 30, 2010 and 209

#### NOTE H - NON-CURRENT LIABILITIES - Continued

Under the terms of the bond resolutions, the Hospital is required to maintain certain deposits with a bank. Such deposits are included with restricted assets in the financial statements. The bond resolution also places limits on the incurrence of additional borrowings and requires that the Hospital satisfy certain measures of financial performance as long as the notes are outstanding. The Hospital is subject to a prepayment penalty of 3% of the unpaid principal balance if such prepayment is on or before the first interest rate adjustment date.

Scheduled principal and interest repayments on long-term debt are as follows:

Year Ending June 30,	——————————————————————————————————————	Long-Term Debt Principal Interest				Total
		петраг		<u> </u>		Total
2011	\$	510,000	\$	105,600	\$	615,600
2012		510,000		86,400		596,400
2013		510,000		67,200		577,200
2014		307,500		49,200		356,700
2015		160,000		40,800		200,800
2016-2020		800,000		108,000		908,000
2021	************	120,000		2,400		122,400
	\$	2,917,500	\$	459,600	\$	3,377,100

#### NOTE I - EMPLOYEE RETIREMENT AND DEFINED BENEFIT PENSION PLAN

The Hospital contributes to the Iowa Public Employees Retirement System (IPERS) which is a cost-sharing multiple-employer defined benefit pension plan administered by the State of Iowa. IPERS provides retirement and death benefits which are established by State statute to plan members and beneficiaries. IPERS issues a publicly available financial report that includes financial statements and required supplementary information. The report may be obtained by writing to IPERS, P.O. Box 9117, Des Moines, Iowa, 50306-9117.

Plan members are required to contribute 4.30% (4.50% beginning July 1, 2010) of their annual salary and the Hospital is required to contribute 6.65% (6.95% beginning July 1, 2010) of annual covered payroll. Contribution requirements are established by State statute. The Hospital's contributions to IPERS for the years ended June 30, 2010, 2009, and 2008, were approximately \$365,000, \$311,100, and \$270,200, respectively, equal to the required contributions for each year.

Notes to Financial Statements June 30, 2010 and 2009

#### NOTE J - COMMITMENTS AND CONTINGENCIES

#### Other Post Employment Benefits (OPEB)

The Hospital implemented GASB Statement No. 45 Accounting and Financial Reporting by Employers for Post Employment Benefits Other Than Pensions during the year ended June 30, 2009.

Plan Description: As required by state law, the Hospital offers health insurance to former employees who have retired after age 55, but have not reached Medicare eligibility. The fully insured plan is a part of the plan offered to all Hospital employees, and the retiree must pay a health insurance premium equal to that charged for current employees.

Potential for Liability: A review of the Hospital's current and potential future exposure to this requirement resulted in the conclusion that no material liability exists. Therefore no liability has been recorded.

#### Note Payable

The Hospital has entered into an agreement with the Guthrie County Rural Electric Cooperative Association (the cooperative) under the Rural Economic Development Loan and Grant Program. Under the terms of the agreement, \$183,050 was advanced to the Hospital through a non-interest bearing note, payable in 40 equal quarterly installments through June, 2013. Through a separate agreement, the Hospital subsequently loaned the \$183,050 to Little Panther Daycare (the daycare) to be used for the construction of a daycare facility in Panora, Iowa. This note receivable from the daycare is also non-interest bearing. It is payable in 120 equal monthly installments through June, 2013 and is secured by a mortgage agreement on the daycare's assets. The note receivable from the daycare is further guaranteed by three area businesses who each separately entered into agreements with the Hospital guaranteeing 25% of the total amount owed by the daycare to the Hospital after the sale of collateral. The offsetting note receivable and note payable of \$54,915 at June 30, 2010 (\$73,220 at June 30, 2009) have not been recorded on the Hospital's balance sheet.

#### Risk Management

The Hospital is insured by a claims-made policy for protection against liability claims resulting from professional services provided or which should have been provided. Management believes that the malpractice insurance coverage is adequate to cover all asserted and any unasserted claims, therefore no related liability has been accrued. Guthrie County Hospital is exposed to various other common business risks for which it is covered by commercial insurance. Settled claims from these risks have not exceeded insurance coverage during the past three fiscal years.

#### Notes Receivable

The notes receivable represent funds advanced under an agreement with a healthcare professional who began practicing in the community in August, 2010. The agreement includes commitments by the healthcare professional to provide medical services in the community for a specified period of years. In exchange for the commitments of time and services, the Hospital will forgive the notes over the term of the commitments.

#### NOTE J - COMMITMENTS AND CONTINGENCIES - Continued

#### Construction in Progress

During the year ended June 30, 2009, the Hospital began a construction project encompassing the extension of an existing wing of the Hospital, and the addition of a medical office building attached to the main Hospital building. By June 30, 2010, the addition to the wing was completed and the medical office building was under construction. The medical office building has an estimated total cost of \$870,000. At June 30, 2010, costs incurred on the medical office building totaled \$803,411. Financing for the project is being provided through the issuance of Hospital Revenue Bonds (Note H) and by funds generated internally. The remaining \$34,981 in construction in progress at June 30, 2010 is related to various smaller projects for which no further commitments exist as of the date of this report.

As of June 30, 2010, the Hospital has also entered into separate agreements to purchase various equipment items. The total estimated cost of all the equipment is \$690,000. At June 30, 2010, costs incurred on the equipment totaled \$179,758, and are included in major moveable equipment on the Hospital's financial statements. Funding for the equipment is being provided by funds generated internally.

#### Subsequent Events

The Hospital has evaluated all subsequent events through September 17, 2010, the date the financial statements were available to be issued.

\* \* \*



#### GUTHRIE COUNTY HOSPITAL Budgetary Comparison Schedule Year Ended June 30, 2010

The budgetary comparison is presented as Required Supplementary Information in accordance with Government Auditing Standards. In accordance with the Code of Iowa, the Board of Trustees annually adopts a budget following required public notice and hearings. The annual budget may be amended during the year utilizing similar statutorily-prescribed procedures. The following is a reconciliation between reported amounts and the modified accrual basis used to prepare the budget. The adjustments result from accounting for interest and net assets differently for financial statement and budget purposes.

		Per Financial Statements				
		Unrestricted Fund	Restricted Fund	Total		
Amount raised by taxation		\$ 1,282,244	\$	\$ 1,282,244		
Other revenues Transfers in (out)		10,515,207 157,315 11,954,766	158,840 ( 157,315) 1,525	10,674,047  11,956,291		
Expenses		11,084,547		11,084,547		
Net		870,219	1,525	871,744		
Balance beginning of year		7,964,122	466	7,964,588		
Balance end of year		<u>\$ 8,834,341</u>	<u>\$ 1,991</u>	\$ 8,836,332		
	Total Per Financial Statements	Budget Adjustments	Budget Basis	Amended Budget		
Amount raised by taxation	\$ 1,282,244	\$	\$ 1,282,244	\$ 1,250,355		
Other revenues	<u>10,674,047</u> 11,956,291	79,600 79,600	<u>10,753,647</u> 12,035,891	<u>10,720,040</u> 11,970,395		
Expenses	11,084,547	79,600	11,164,147	11,600,000		
Net	871,744		871,744	370,395		
Balance beginning of year	7,964,588	( 426,676)	7,537,912	7,537,912		
Balance end of year	\$ 8,836,332	\$( 426,676)	\$ 8,409,656	\$ 7,908,307		

See Independent Auditor's Report.



## GUTHRIE COUNTY HOSPITAL Patient Receivables June 30,

# Analysis of Aging:

		2010	)		2009	
Days Since Discharge		Amount	Percent To Total		Amount	Percent To Total
In hospital - 30 31 - 60 61 - 90 91 - 150 151 - 180 181 and over	\$	1,079,736 327,070 93,435 64,273 24,103 74,879 1,663,496	65% 20 6 4 1 4 100%	\$	1,012,058 274,790 101,318 85,685 37,651 42,166 1,553,668	65% 18 7 5 2 3 100%
Allowance for doubtful accounts Allowance for contractual adjustments	<u> </u>	144,100 277,000 1,242,396		<u>\$</u>	137,500 249,000 1,167,168	

# Allowance for Doubtful Accounts:

	Year ende	d June 30, 2009
Balance, beginning	\$ 137,500	\$ 255,000
Provision for bad debts	372,908	451,620
Recoveries of accounts previously written off	<u>264,653</u> 775,061	363,164 1,069,784
Accounts written off	630,961	932,284
Balance, ending	<u>\$ 144,100</u>	<u>\$ 137,500</u>

# GUTHRIE COUNTY HOSPITAL Inventory/Prepaid Expense June 30,

		2010	 2009
Inventory  Medical and surgical supplies Laboratory Pharmacy Other	\$	51,866 28,364 106,919 19,219	\$ 61,590 25,518 90,787 19,219
Prepaid Expense Insurance Service contracts and dues	<u>\$</u> \$	9,279 106,370	\$ 197,114 12,256 83,907
	<u>\$</u>	115,649	\$ 96,163

## GUTHRIE COUNTY HOSPITAL Patient Service Revenue Year ended June 30,

	2010	
	Inpatient	Outpatient
Daily Patient Services:  Medical, surgical and obstetric Special care Swing bed	\$ 997,77'   997,77'	
Other Nursing Services: Cardiac rehabilitation Operating and recovery rooms Emergency room Central services and supply Intravenous therapy Observation	33,40 127,57 40,58 39,63 56,49 297,69	3 643,282 7 125,196 4 53,572 2 231,367
Other Professional Services:     Emergency room physicians     Laboratory     Blood     Electrocardiology     Radiology     CT scan     Ultrasound     Mammography     Nuclear imaging     MRI     Pharmacy     Anesthesia     Respiratory therapy     Speech therapy     Physical therapy     Occupational therapy     Outpatient clinics     Diabetic education     Hospice     Clinic professional fees	43,10 273,61 6,40 14,60 50,29 172,23 16,27 1,26 10,23 249,62 8,63 289,37 1,20 30,22 2,41 26 1,169,78	7 2,004,185 9 42,275 9 65,439 3 380,647 0 1,218,612 2 242,231 113,089 6 15,266 2 383,585 8 584,472 0 116,791 7 216,726 3 40,318 7 661,353 7 140,433 6 57,247 14,116 
	<u>\$ 2,465,25</u>	<u>\$ 8,587,639</u>

	2010		2009
Swing Bed	<u>Clinic</u>	Total	Total
-			
\$	\$	\$ 997,777	\$ 942,709
			1,468
378,222		378,222	387,040
378,222		1,375,999	1,331,217
		100 106	100.020
		122,126	180,820
<del></del>		829,168	642,782
15 205		770,855	596,372
15,385		181,168	205,262
10,012		103,218	88,879
	## ## 	287,859	392,078
25,397		2,294,394	2,106,193
162		262.920	222.064
163	12.064	362,820	333,964
102,325	12,864	2,392,991	2,377,459
4,199		52,883	52,955
2,571	900 NA	82,619	121,406
12,393		443,333	423,045
19,877	SHE MAY	1,410,719	1,355,234
6,499		265,002	281,849
		113,089	115,085
909		17,441	28,823
1,894	<b></b>	395,711	454,892
241,846	34,137	1,110,083	1,078,816
		125,421	139,154
266,545		772,648	749,725
10,630		52,151	24,039
144,871		836,451	752,077
47,127	***	189,977	162,585
		57,513	48,353
		14,116	20,875
14,700		14,700	40,480
New Aces	529,769	<u>529,769</u>	404,379
876,549	576,770	9,239,437	8,965,195
\$ 1,280,168	\$ 576,770	\$ 12,909,830	<u>\$ 12,402,605</u>

#### GUTHRIE COUNTY HOSPITAL Revenue and Related Adjustments Year ended June 30,

	2010	2009
Net Patient Service Revenue Patient service revenue Contractual adjustments Provision for bad debts Charity care	\$ 12,909,830 ( 2,119,415) ( 372,908) ( 61,879) \$ 10,355,628	\$ 12,402,605 ( 2,678,902) ( 451,620) ( 82,764) \$ 9,189,319
Other Revenue Dietary revenue Congregate meals Ancillary service coverage revenue Outpatient clinic rental Fitness center Wellness revenue Pharmacy student income Miscellaneous income	\$ 25,168 54,399 21,716 30,744 49,606 2,180 5,000 6,138	\$ 18,247 55,956 22,661 33,555 53,378 3,340 8,500 2,465
	<u>\$ 194,951</u>	<u>\$ 198,102</u>

#### GUTHRIE COUNTY HOSPITAL Nursing Service Expenses Year ended June 30,

	 2010	2009	
Administrative: Salaries and wages Employee benefits Supplies and other expense	\$ 84,141 16,972 1,217 102,330	\$	78,816 15,684 1,159 95,659
Medical, Surgical and Obstetric: Salaries and wages Employee benefits Supplies and other expense	 923,208 299,014 151,913 1,374,135		846,237 243,910 111,424 1,201,571
Cardiac Rehabilitation: Salaries and wages Employee benefits Supplies and other expense	 70,182 14,943 4,312 89,437	Mandendelinated	76,634 10,600 24,753 111,987
Operating and Recovery Rooms: Salaries and wages Employee benefits Purchased services Supplies and other expense	 72,786 20,288 25,935 79,787 198,796		60,168 15,877  109,282 185,327
Emergency Room: Salaries and wages Employee benefits Supplies and other expense	 194,689 56,814 80,314 331,817	******	142,091 37,333 73,206 252,630

#### GUTHRIE COUNTY HOSPITAL Nursing Service Expenses - Continued Year ended June 30,

	2010	2009
Central Services and Supply: Salaries and wages Employee benefits Supplies and other expense	\$ 68,202 33,915 17,089 119,206	\$ 67,128 28,731 13,879 109,738
Intravenous Therapy:	2.505	2.207
Supplies and other expense	3,585	2,387
	<u>\$ 2,219,306</u>	<u>\$ 1,959,299</u>
<u>S</u>	<u>UMMARY</u>	
Salaries and wages Employee benefits Other expense	\$ 1,413,208 441,946 364,152	\$ 1,271,074 352,135 336,090
	<u>\$ 2,219,306</u>	\$ 1,959,299

#### GUTHRIE COUNTY HOSPITAL Other Professional Service Expenses Year ended June 30,

	2010	2009
Emergency Room Professional: Salaries and wages Employee benefits Professional fees	\$ 675,108 121,512 44,789 841,409	\$ 396,192 60,766 295,315 752,273
Laboratory: Salaries and wages Employee benefits Professional fees Supplies and other expense	243,683 86,198 2,188 292,736 624,805	251,754 87,924 4,594 256,989 601,261
Blood: Blood Supplies and other expense	33,073	34,548 <u>56</u> 34,604
Electrocardiology: Salaries and wages Employee benefits Supplies and other expense	4,736 1,165 <u>973</u> 6,874	5,298 1,284 2,897 9,479
Radiology: Salaries and wages Employee benefits Supplies and other expense	199,729 54,147 102,359 356,235	200,311 50,834 <u>97,358</u> 348,503
CT Scan: Salaries and wages Employee benefits Supplies and other expense	18,391 4,242 121,632 144,265	18,465 3,933 109,557 131,955
Ultrasound: Salaries and wages Employee benefits Supplies and other expense	6,982 2,688 48,670 58,340	7,262 2,450 32,823 42,535

#### GUTHRIE COUNTY HOSPITAL Other Professional Service Expenses - Continued Year ended June 30,

	2010	2009
Mammography: Salaries and wages Employee benefits Supplies and other expense	\$ 6,604 1,780 12,956 21,340	\$ 6,529 1,563 11,530 19,622
Nuclear Imaging: Supplies and other expense	8,582	13,873
MRI: Supplies and other expense	53,315	61,975
Pharmacy: Salaries and wages Employee benefits Professional fees Drugs Supplies and other expense	280,845 76,362 33,636 234,228 23,952 649,023	284,330 69,971 1,767 203,023 20,860 579,951
Anesthesia: Professional fees Supplies and other expense	115,740 1,202 116,942	107,400 4,424 111,824
Respiratory Therapy: Salaries and wages Employee benefits Oxygen, supplies and other expense	108,201 22,408 69,665 200,274	101,922 18,720 80,995 201,637
Speech Therapy: Professional fees	34,170	18,408
Physical Therapy: Salaries and wages Employee benefits Supplies and other expense	233,589 80,134 18,950 332,673	223,667 66,843 19,983 310,493
Occupational Therapy: Professional fees Supplies and other expense	61,260 288 61,548	56,080 574 56,654

#### GUTHRIE COUNTY HOSPITAL Other Professional Service Expenses - Continued Year ended June 30,

		2010	2009
Medical Records: Salaries and wages Employee benefits Supplies and other expense	\$	204,795 79,097 56,309 340,201	\$ 177,483 50,319 35,431 263,233
Social Services: Salaries and wages Employee benefits Supplies and other expense	_	26,221 9,654 512 36,387	33,425 11,162 856 45,443
Outpatient Clinics: Salaries and wages Employee benefits Supplies and other expense		29,104 7,945 5,105 42,154	28,596 7,160 3,175 38,931
Fitness Center: Salaries and wages Employee benefits Supplies and other expense	_	37,681 13,121 10,041 60,843	38,355 12,657 6,058 57,070
Diabetic Education: Salaries and wages Employee benefits Supplies and other expense	<u> </u>	18,885 3,671 1,240 23,796 4,046,249	16,987 2,518 1,342 20,847 \$ 3,720,571
<u>S</u>	UMMARY		
Salaries and wages Employee benefits Professional fees Other expense	\$ - <u>\$</u>	564,124 291,783 1,095,788	\$ 1,790,576 448,104 483,564 998,327 \$ 3,720,571

### GUTHRIE COUNTY HOSPITAL Physician Clinic Service Expenses Year ended June 30,

			2010		2009
Physician Service: Salaries and wages Employee benefits Professional fees Supplies and other expense		\$	320,421 59,247  12,860 392,528	\$	222,396 41,249 44,134 31,896 339,675
Nursing Service: Salaries and wages Employee benefits Medical supplies Supplies and other expense			107,999 36,835 23,552 4,611 172,997		86,294 32,529 43,093 5,915 167,831
Business Office: Salaries and wages Employee benefits Supplies and other expense			99,935 37,950 36,862 174,747		131,250 38,543 61,096 230,889
Occupancy Costs: Rent Utilities		<u></u>	4,825 25,996 30,821 771,093	<u> </u>	3,344 23,204 26,548 764,943
	<u>SUMMARY</u>				
Salaries and wages Employee benefits Professional fees Other expense		\$	528,355 134,032  108,706	\$	439,940 112,321 44,134 168,548
		\$	771,093	\$	764,943

# GUTHRIE COUNTY HOSPITAL General Service Expenses Year ended June 30,

			2010	 2009
Dietary: Salaries and wages Employee benefits Food Supplies and other expense		\$	166,962 84,018 106,915 27,014 384,909	\$ 156,155 68,046 106,691 25,165 356,057
Operation of Plant: Salaries and wages Employee benefits Electricity Gas Supplies and other expense			222,522 56,283 119,828 96,388 123,806 618,827	 222,790 52,027 103,130 105,800 92,241 575,988
Housekeeping: Salaries and wages Employee benefits Supplies and other expense		No. of Contract Contr	120,633 71,494 32,242 224,369	123,014 65,427 25,015 213,456
Laundry and Linen: Purchased services Supplies and other expense		\$	15,299 1,815 17,114 1,245,219	\$ 8,317 2,266 10,583 1,156,084
	SUMMARY			
Salaries and wages Employee benefits Other expense		\$	510,117 211,795 523,307	\$ 501,959 185,500 468,625
		<u>\$</u>	1,245,219	\$ 1,156,084

#### GUTHRIE COUNTY HOSPITAL Fiscal and Administrative Service Expenses Year ended June 30,

		2010		2009
Fiscal and Administrative: Salaries and wages Employee benefits Advertising Telephone Supplies and minor equipment Collection expense Computer maintenance Education and meetings Professional fees Printing and postage Purchased services Dues and subscriptions	\$	628,078 193,435 47,034 25,753 38,614 53,798 50,575 7,899 93,673 8,497 43,375 15,559 1,206,290	\$	632,378 168,585 27,834 23,151 35,729 50,070 42,067 12,538 115,237 5,666 21,330 14,822 1,149,407
Admissions Office: Salaries and wages Employee benefits Supplies and other expense		124,394 60,371 9,205 193,970		126,681 43,763 10,542 180,986
Information Systems: Salaries and wages Employee benefits Supplies and other expense		120,203 36,145 38,676 195,024		94,131 31,357 14,577 140,065
Employee Welfare: Salaries and wages Employee benefits Group health and life benefit Workers' compensation insurance Unemployment expense Supplies and other expense		126,907 36,247 74,468 61,624 5,454 30,947 335,647		122,923 26,890 73,478 75,557 3,606 92,148 394,602
Insurance: Liability and property insurance	<u> </u>	81,418 2,012,349	<u>\$</u>	82,666 1,947,726

# GUTHRIE COUNTY HOSPITAL Fiscal and Administrative Service Expenses - Continued Year ended June 30,

	_	2010	2009
	SUMMARY		
Salaries and wages Employee benefits Professional fees Other expense	\$	999,582 498,691 93,673 420,403	\$ 976,113 515,384 115,237 340,992
	<u>\$</u>	2,012,349	\$ 1,947,726
<u>S</u>	UMMARY OF EXPENSES		
Salaries and wages Employee benefits Professional fees Other expense	\$	5,545,816 1,850,588 385,456 2,512,356	\$ 4,979,662 1,613,444 642,935 2,312,582
	<u>\$</u>	10,294,216	\$ 9,548,623

#### GUTHRIE COUNTY HOSPITAL Comparative Statistics Year ended June 30,

	2010	_2009_	_2008_	_2007_	_2006_
Acute Care: Admissions	363	357	280	316	302
Discharges	363	356	283	317	304
Patient days	1,046	1,033	810	919	896
Average length of stay	2.88	2.90	2.86	2.90	2.95
Average occupied beds	2.9	2.8	2.2	2.5	2.5
Swing Bed Program: Admissions	162	160	120	127	118
Discharges	161	163	117	128	115
Patient days	1,128	1,180	737	799	718
Combined Average Occupied Beds	6.0	6.1	4.2	4.7	4.4
Outpatient Occasions of Service	31,555	30,356	29,492	26,402	25,285

#### GUTHRIE COUNTY HOSPITAL Comparative Balance Sheets June 30,

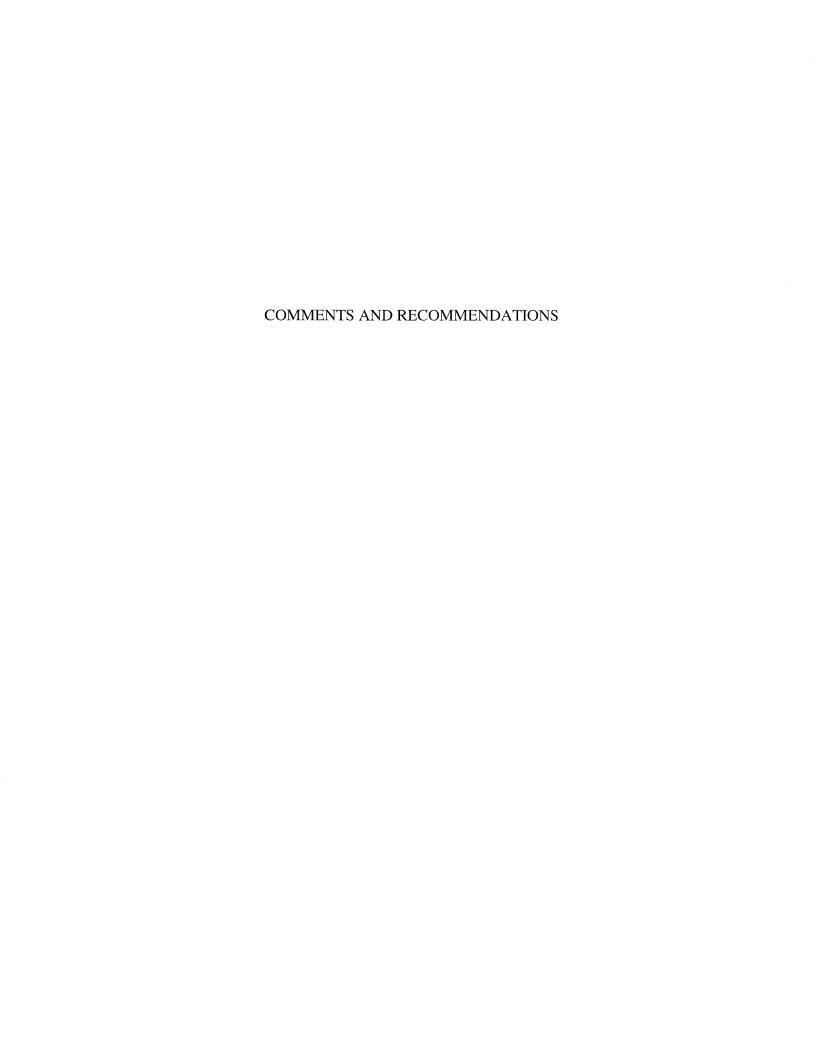
	2010	2009
Current Assets: Cash Patient receivables, net Other receivables Inventory Prepaid expense Other current assets Estimated third-party payor settlements Succeeding year property tax receivable Internally designated assets Total current assets	\$ 398,618 1,242,396 23,957 206,368 115,649 19,465 213,000 1,372,000 242,882 3,834,335	\$ 1,426,524 1,167,168 18,842 197,114 96,163 27,490  1,250,400 357,774 4,541,475
Other Assets: Designated and restricted assets, net Capital assets, net Deferred financing costs Notes receivable Total other assets	10,326,982 77,168 50,000 10,454,150	8,135,860 32,443 22,500 8,190,803
Total assets	<u>\$ 14,288,485</u>	<u>\$ 12,732,278</u>
Current Liabilities: Current maturities of long-term debt Accounts payable Accrued expenses Estimated third-party payor settlements Accrued interest	\$ 510,000 635,694 526,959	\$ 190,000 578,356 487,434 444,000
Deferred revenue for succeeding year property tax receivable  Total current liabilities	1,372,000 3,044,653	1,250,400 2,950,190
Long-Term Debt, Net	2,407,500	1,817,500
Total liabilities	5,452,153	4,767,690
Net Assets	8,836,332	7,964,588
Total liabilities and net assets	<u>\$ 14,288,485</u>	\$ 12,732,278

2008	2007	2006
\$ 749,607 1,424,981 18,257 201,612	\$ 463,003 1,215,436 24,590 163,866	\$ 555,869 1,105,626 39,414 171,111
67,738 22,526 180,000 1,241,200	62,795 22,761 58,500 1,156,100	1,241,400
342,040 4,247,961	317,476 3,484,527	188,137 3,381,861
, ,	.,	-,,
810,990 6,207,903 35,204	5,241,914 37,506	235,688 3,833,797 36,000
7,054,097	5,279,420	4,105,485
<u>\$ 11,302,058</u>	\$ 8,763,947	
\$ 194,772 286,642 433,474  118	\$ 262,000 307,614 385,071  435	
<u>1,241,200</u> 2,156,206	1,156,100 2,111,220	
1,880,000	474,242	336,270
4,036,206	2,585,462	2,256,314
7,265,852	6,178,485	5,231,032
\$ 11,302,058	\$ 8,763,947	\$ 7,487,346

#### GUTHRIE COUNTY HOSPITAL Comparative Statements of Revenues, Expenses and Changes in Net Assets Year ended June 30,

	2010	2009
Patient Service Revenue	\$ 12,909,830	\$ 12,402,605
Adjustments to Patient Service Revenue	( 2,554,202)	( 3,213,286)
Net Patient Service Revenue	10,355,628	9,189,319
Other Revenue	194,951	198,102
Total Revenue	10,550,579	9,387,421
Expenses	11,084,547	10,274,513
Operating Loss	( 533,968)	( 887,092)
Non-Operating Revenues, Net	1,246,872	1,257,981
Excess of Revenues Over Expenses Before Capital Grants and Contributions	712,904	370,889
Capital Grants and Contributions	158,840	327,847
Increase in Net Assets	<u>\$ 871,744</u>	<u>\$ 698,736</u>

2008	2007	2006
\$ 11,878,840	\$ 10,436,866	\$ 9,282,260
( 3,160,389)	( 2,569,052)	( 1,865,805)
8,718,451	7,867,814	7,416,455
193,380	212,791	203,416
8,911,831	8,080,605	7,619,871
9,280,271	8,499,470	8,074,333
( 368,440)	( 418,865)	( 454,462)
1,205,807	1,335,818	861,293
837,367	916,953	406,831
250,000	30,500	56,100
\$ 1,087,367	<u>\$ 947,453</u>	\$ 462,931



## Gronewold, Bell, Kyhnn & Co. P.C. CERTIFIED PUBLIC ACCOUNTANTS: BUSINESS AND FINANCIAL CONSULTANTS

1910 EAST 7th STREET BOX 369 ATLANTIC, IOWA 50022-0369 (712) 243-1800 FAX (712) 243-1265 CPA@GBKCO.COM

MARK D. KYHNN DAVID L. HANNASCH KENNETH P. TEGELS CHRISTOPHER J. NELSON DAVID A. GINTHER

Independent Auditor's Report on Internal Control over Financial Reporting
and on Compliance and Other Matters

Based on an Audit of Financial Statements Performed in Accordance with
Government Auditing Standards

To the Board of Trustees Guthrie County Hospital Guthrie Center, Iowa

We have audited the financial statements of Guthrie County Hospital as of and for the year ended June 30, 2010, and have issued our report thereon dated September 17, 2010. We conducted our audit in accordance with auditing standards generally accepted in the United States of America and the standards applicable to financial audits contained in Government Auditing Standards, issued by the Comptroller General of the United States.

#### Internal Control Over Financial Reporting

In planning and performing our audit, we considered Guthrie County Hospital's internal control over financial reporting as a basis for designing our auditing procedures for the purpose of expressing our opinion on the financial statements, but not for the purpose of expressing our opinion on the effectiveness of Guthrie County Hospital's internal control over financial reporting. Accordingly, we do not express an opinion on the effectiveness of the Hospital's internal control over financial reporting.

Our consideration of internal control over financial reporting was for the limited purpose described in the preceding paragraph and would not necessarily identify all deficiencies in internal control over financial reporting that might be significant deficiencies or material weaknesses, and, therefore, there can be no assurance all deficiencies, significant deficiencies, or material weaknesses have been identified. However, as described in the accompanying Schedule of Findings, we identified certain deficiencies in internal control over financial reporting that we consider to be significant deficiencies.

A deficiency in internal control exists when the design or operation of a control does not allow management or employees, in the normal course of performing their assigned functions, to prevent or detect and correct misstatements on a timely basis. A material weakness is a deficiency, or a combination of deficiencies, in internal control such that there is a reasonable possibility a material misstatement of the Hospital's financial statements will not be prevented or detected and corrected on a timely basis.

To the Board of Trustees Guthrie County Hospital

A significant deficiency is a deficiency or combination of deficiencies in internal control which is less severe than a material weakness, yet important enough to merit attention by those charged with governance. We consider the deficiency described in Part I of the accompanying Schedule of Findings as item 10-I-A to be a significant deficiency.

#### Compliance and Other Matters

As part of obtaining reasonable assurance about whether Guthrie County Hospital's financial statements are free of material misstatement, we performed tests of its compliance with certain provisions of laws, regulations, contracts, and grant agreements, non-compliance with which could have a direct and material effect on the determination of financial statement amounts. However, providing an opinion on compliance with those provisions was not an objective of our audit and, accordingly, we do not express such an opinion. The results of our tests disclosed no instances of non-compliance or other matters that are required to be reported under <u>Government Auditing Standards</u>. However, we noted certain immaterial instances of non-compliance or other matters that are described in Part II of the accompanying Schedule of Findings.

Comments involving statutory and other legal matters about the Hospital's operations for the year ended June 30, 2010 are based exclusively on knowledge obtained from procedures performed during our audit of the financial statements of the Hospital. Since our audit was based on tests and samples, not all transactions that might have had an impact on the comments were necessarily audited. The comments involving statutory and other legal matters are not intended to constitute legal interpretations of those statutes.

Guthrie County Hospital's responses to findings identified in our audit are described in the accompanying Schedule of Findings. While we have expressed our conclusions on the Hospital's responses, we did not audit the Hospital's responses and, accordingly, we express no opinion on them.

This report, a public record by law, is intended solely for the information and use of the officials, employees and constituents of Guthrie County Hospital and other parties to whom the Hospital may report, including federal awarding agencies and pass-through entities. This report is not intended to be and should not be used by anyone other than these specified parties.

Sconwoll, Bell, Kylm . 6. P.C

Atlantic, Iowa

September 17, 2010

#### **GUTHRIE COUNTY HOSPITAL**

Schedule of Findings Year ended June 30, 2010

#### PART I - SIGNIFICANT DEFICIENCIES

<u>10-I-A Segregation of Duties</u>: A limited number of people have the primary responsibility for most of the accounting and financial duties. As a result, some of those aspects of internal accounting control which rely upon an adequate segregation of duties are, for all practical purposes, missing in the Hospital. This deficiency is common among most small rural Hospitals.

<u>Recommendation</u>: We recognize that it may not be economically feasible for the Hospital to employ additional personnel for the sole purpose of segregating duties, however, it is our professional responsibility to bring this control deficiency to your attention. We recommend that the Board be aware of the lack of segregation of duties and that they act as an oversight group to the accounting personnel.

<u>Response</u>: The Board is aware of this lack of segregation of duties, but it is not economically feasible for the Hospital to employ additional personnel for this reason. The Board will continue to act as an oversight group.

Conclusion: Response accepted.

\* \* \*

#### PART II - REQUIRED STATUTORY REPORTING

<u>10-II-A Certified Budget</u>: Hospital expenditures during the year ended June 30, 2010 did not exceed the amount budgeted.

<u>10-II-B Questionable Expenditures</u>: During the audit, we noted a certain expenditure approved in the Board minutes that may not meet the requirements of public purpose as defined in the Attorney General's opinion dated April 25, 1979. The expense was as follows:

Paid to	Purpose	_A	_Amount_	
Various Organizations	Employee Recognition Dinner	\$	2.579	

<u>Recommendation</u>: We recommend that the Board continue to document the public purpose of such an expenditure before authorization is given.

<u>Response</u>: The expenditure is considered part of the employee benefit package and the Board feels it meets the requirements of public purpose as defined by the Attorney General's opinion dated April 25, 1979.

Conclusion: Response accepted.

<u>10-II-C Travel Expenses</u>: No expenditures of Hospital money for travel expenses of spouses of Hospital officials and/or employees were noted.

### GUTHRIE COUNTY HOSPITAL

Schedule of Findings Year ended June 30, 2010

#### PART II - REQUIRED STATUTORY REPORTING - Continued

<u>10-II-D Business Transactions</u>: During our audit, we noted no business transactions with Hospital employees or officials.

<u>10-II-E Board Minutes</u>: No transactions were found that we believe should have been approved in the Board minutes but were not.

<u>10-II-F Deposits and Investments</u>: We noted no instances of non-compliance with the deposit and investment provisions of Chapter 12B and 12C of the Code of Iowa and the Hospital's investment policy.

\* \* \*